

# SURETY BOND

**NO:** \_\_\_\_\_

## KNOW ALL MEN BY THESE PRESENTS:

That we, \_\_\_\_\_ as Principal and \_\_\_\_\_ as Surety, acknowledge ourselves to be indebted and firmly bound unto THE EMPIRE DISTRICT COMPANY in the sum of \$ \_\_\_\_\_ and NO/100 Dollars for the payment whereof we bind ourselves, our heirs, executors, administrators and assigns, jointly and severally by these presents.

WHEREAS, the said \_\_\_\_\_ has entered a contract dated the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, with THE EMPIRE DISTRICT COMPANY, a corporation with its principal place of business at Joplin, Missouri to take from it electric/gas service and to pay promptly therefore the bills presented by said THE EMPIRE DISTRICT COMPANY in accordance with THE EMPIRE DISTRICT COMPANY'S rules and regulations and to abide by said rules and regulations in other respects therein set forth.

NOW, THEREFORE, the terms of this obligation are such that if said \_\_\_\_\_ performs its obligations under said contract and shall pay all bills for such electric/gas services promptly prior to the delinquent date, then this obligation shall not be enforced, otherwise to remain in full force and effect; provided that if THE EMPIRE DISTRICT COMPANY shall notify said Surety, when, at any time, all or any part of said electric/gas service bills shall remain unpaid after the date such bill or bills are delinquent and thereupon said Surety, upon giving thirty (30) days notice to quit such service under the payment by said Principal or Surety of the total amount then due and owing under said contract (not to exceed the sum stated herein) to THE EMPIRE DISTRICT COMPANY, be discharged from further liability hereon, and the obligation of the Surety hereunder shall cease.

IN WITNESS WHEREOF, the parties have hereunto signed this Bond this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

{SURETY}

_____ Attorney-in-fact Signature	_____ Customer, Principal Signature
_____ Insurance Company Name	_____ Business Name
_____ Insurance Company Address	_____ Business Address
_____ Phone	_____ Empire Account Number

5/14/2007

# INTEGRITY SURETY BOND APPLICATION

AGENCY NAME: \_\_\_\_\_ AGENCY CONTACT \_\_\_\_\_  
 AGENCY PHONE: \_\_\_\_\_ AGENCY FAX: \_\_\_\_\_ E-MAIL: \_\_\_\_\_  
 AGENCY ADDRESS: \_\_\_\_\_  
(Street) (City) (State) (Zip)

**CURRENT OR EXPIRING QUOTE WE ARE LOOKING TO BEAT?** \_\_\_\_\_

**NAME OF PREVIOUS SURETY COMPANY WRITING THE BOND?** \_\_\_\_\_

**SECTION I: BOND APPLIED FOR:**

TYPE OF BOND: \_\_\_\_\_ EFF.DATE: \_\_\_\_\_ EXP.DATE: \_\_\_\_\_  
 TYPE OF COMPANY CORP  LLC  DBA  PARTNERSHIP  AMOUNT: \_\_\_\_\_  
 OBLIGEE: \_\_\_\_\_

OBLIGEE ADDRESS: \_\_\_\_\_  
(Street) (City) (State) (Zip)

**SECTION II: GENERAL INFORMATION**

APPLICANT'S NAME: \_\_\_\_\_ SPOUSE NAME \_\_\_\_\_  
 SS#: \_\_\_\_\_ SPOUSE SS# \_\_\_\_\_ HOME PHONE: \_\_\_\_\_  
 RESIDENTIAL ADDRESS: \_\_\_\_\_  
(Street) (City) (State) (Zip)

BUSINESS NAME: \_\_\_\_\_

BUSINESS PHONE: \_\_\_\_\_ BUSINESS FAX: \_\_\_\_\_ Client E-mail \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_  
(Street) (City) (State) (Zip)

DATE BUSINESS BEGAN UNDER CURRENT NAME: \_\_\_\_\_ BUSINESS TAX ID: \_\_\_\_\_

HAS ANY COMPANY REFUSED TO ISSUE BONDS FOR ANY PURPOSE? YES  NO  DO YOU HAVE ANY LIENS, CLAIMS, OR JUDGEMENTS AGAINST YOU? YES  NO

HAS APPLICANT EVER FAILED IN BUSINESS? YES  NO  HAS APPLICANT EVER FILED BANKRUPTCY? YES  NO

**IF YES TO ANY, PLEASE EXPLAIN ON A SEPERATE SHEET OF PAPER:**

**SECTION III: ADDITIONAL OWNERS / PARTNERS**

APPLICANT'S NAME: \_\_\_\_\_ SPOUSE NAME \_\_\_\_\_  
 SS#: \_\_\_\_\_ SPOUSE SS# \_\_\_\_\_ HOME PHONE: \_\_\_\_\_  
 RESIDENTIAL ADDRESS: \_\_\_\_\_  
(Street) (City) (State) (Zip)

**STATEMENT OF ASSETS & LIABILITIES AS OF \_\_\_\_\_**

ASSETS		LIABILITIES	
CASH IN BANK	\$	NOTES PAYABLE TO BANKS	\$
CASH ON HAND	\$	NOTES PAYABLE TO OTHERS	\$
STOCKS & BONDS	\$	ACCOUNTS PAYABLE	\$
ACCOUNTS RECEIVABLE	\$	FEDERAL & STATE INCOME TAX DUE	\$
NOTES RECEIVABLE	\$	ALL OTHER TAXES	\$
INVENTORY	\$	ACCRUALS, PAYROLLS, ETC.	\$
CASH VALUE OF LIFE INSURANCE	\$	DUE ON EQUIPMENT	\$
EQUIPMENT	\$	DUE ON REAL ESTATE	\$
REAL ESTATE	\$	OTHER LIABILITIES	\$
OTHER ASSETS	\$	CAPITAL STOCK (IF A CORPORATION)	\$
		SURPLUS & UNDIVIDED PROFITS	\$
<b>TOTAL ASSETS</b>	<b>\$</b>	<b>TOTAL LIABILITIES</b>	<b>\$</b>
		<b>NET WORTH</b>	<b>\$</b>
<b>NAME OF OWNERS</b>		<b>NAME &amp; TITLE OF OFFICERS</b>	<b>PERCENTAGE OF OWNERSHIP</b>

Completion of this form constitutes permission to obtain consumer information which will be used to determine bonding eligibility This information will be held in the strictest confidence no premium financing will be accepted as premium is earned in full.

**Integrity Bonds Inc**

**Toll Free: (866) 420-2613**

**Local (480) 626-8916**

**E-Mail info@integritybonds.com**

**Fax: (602) 674-8235**